recommended even though it has been prepared primarily for the North American market. In five sections it covers clinical neurosurgical physiology, pre-operative management, intra-operative management and post-operative management and complications. The basic science is excellent and clinical points of management together with explanations of intra-operative monitoring and positioning are well done. The sections about post-operative management and complications are presented in a practical and realistic way.

The practical concern for the outcome of the patient's surgical management and adequate rational scientific explanation for the conduct of neurosurgical practice are the two main principles on which this text has been based and account for its excellence. The author admits it is intended to be a supplement to the clinical training normally obtained in the course of a junior appointment in neurosurgery and the minor differences between American and European practice will be corrected by the experience.

CHARLES POLKEY

Migraine and its Variants. By George Selby (Pp 144; £16.95.) Bristol: PSG Wright, 1983.

There must be something in the air of New South Wales that produces excellent migraineologists. This is yet another book on migraine from Sydney, and is intended for general practitioners. There are seven chapters, most of which cover the usual ground of aetiology, pathogenesis and treatment. The outstanding chapter is the one on clinical features of migraine and its variants; the longest in the book, it reveals the very wide experience and interests that George Selby has shown for decades in this subject. He destroys several widely held migraine myths, for example, that unilateral headache is necessarily contralateral to the neurological symptoms. The book is worth buying just for this particular chapter alone though the others do provide useful reviews of current trends in migraine research.

When two "headachologists" meet there are bound to be at least two options, but cluster headache is no longer regarded as a migraine variant—there are just too many differences: in age and sex incidence, periodicity and response to lithium etc. Nor would I agree with his statement on page 11 "at the other end of the spectrum, stress contributes little to purely classical mig-

aine and hardly at all to cluster headache".

I can unreservedly recommend the book for family doctors, and indeed neurologists who want an overall view of the present state of the field.

F CLIFFORD ROSE

Epilepsy: Diagnosis and Management. Edited by Thomas R Browne and Robert G Feldman (Pp 376; \$38.50.) Boston: Little, Brown & Company, 1983.

This is a multi-author North American text book on the medical diagnosis and treatment of epilepsy. It is divided into 31 chapters covering basic mechanisms, seizure types, electroencephalography, clinical pharmacology of antiepileptic drugs and specialised treatments. Each page is divided into two print columns, the sections are short with frequent headings and the book is carefully edited with a constant style throughout.

The approach by the authors, most of whom are clinicians, is factual rather than anecdotal and the volume contains a useful pool of references to 1982. However, the attempt to provide comprehensive information, particularly about drugs, at times obscures those matters which are clinically important. The first ten chapters analyse the different seizure types and a subsequent group of ten examines the drugs used in treatment. However, there is insufficient space devoted to common management problems, and, as a result, the inexperienced physician would find it hard to gain instant expertise from reading this book. The experienced reader will, however, note considerable differences between American and European practice, particularly in regard to drug treatment. The only section which gives guidance about treating newly diagnosed patients (contained somewhat confusingly in a chapter on *pharmacologic principles*) does not mention sodium valproate for treating tonic clonic seizures. This drug is also omitted from the section on chronic prophylaxis of febrile seizures. The recommended treatment of status epilepticus is also substantially different, the authors preferring intravenous phenytoin over the benzodiazepines, and chlor-methiazole (which is not available in the US) is not mentioned.

It should be noted that the classification of seizures used is the 1981 ILAE revision, about which there is still controversy.

Although the word *management* appears in the subtitle of this book, the non medical

aspects of management are not well covered. The inclusion of a chapter on nursing management and resources available to patients was imaginative but the result is disappointing, as the former is only discussed in conventional medical terms and the latter only applicable to the USA.

In summary, although this is a highly competent reference book, it contains no new information and its format restricts its immediate usefulness in the clinical situation. With such a wealth of clinical experience amongst its authors, this is perhaps rather a pity.

JOLYON OXLEY

Controversies in Neurology. Edited by Richard A Thomason and John R Green. (Pp 173; \$48.98.) New York: Raven Press, 1982.

As the title indicates, this volume deals with topics in neurology and neurosurgery where at the present time controversy exists as to the most appropriate form of management. The book is sponsored by the Barrow Institute of Neurology of Phoenix, Arizona, and is the outcome of a symposium where many internationally known authors took part. The eleven chapters cover four broad fields of interest. Cervical disc degeneration and its neurological complications, and the management of malignant disease in the spine and in the head form the major part of the work. There are single chapters on the medical and surgical aspects of stroke prevention, and on the management of arteriovenous malformation and intracranial aneurysm.

There is naturally some variation in the form and content of the different contributions. Most are well argued and well researched, providing a great deal of substantiated fact to back their conclusions. For the neurosurgeon the section on medical versus surgical treatment of metastatic spinal cord tumours is probably the most important. More correctly stated, the question is whether surgery adds anything to the effectiveness of therapy with steroids and radiation. Based on their vast experience at the Memorial Sloan-Kettering Cancer Center, and using ambulation as the essential criterion of success or failure, Drs Shapiro and Posner conclude that the answer is "no". While conceding that a more suitable operation than posterior decompressive laminectomy might prove more effective, surgical complications at 10% represent a serious morbidity problem. They believe that the improved treat-

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ment of the neurological complications of cancer will have to await the improved treatment of cancer itself.

In the two chapters devoted to malignant brain tumour management a comprehensive review of the possibilities and limitations of radiation and chemotherapy helps to compensate for what some might regard as an exaggerated view of the place of surgery. To confirm a CT scan interpretation by biopsy is usually wise, but to suggest that needle biopsy alone, or a decision to forego surgery, subverts the patient's interest in all but the most extreme cases is certainly controversial. Survival alone is not a measure of the value of treatment.

The disastrous natural history of subarachnoid haemorrhage due to ruptured aneurysm, which it seems is largely uninfluenced by the best medical and surgical care, is the starting point of an equally stimulating contribution by Tew. Advocating a policy for prevention as the best hope for the future, this author believes that by identifying the aneurysm-prone patient with selective screening tests it will be possible to reduce the present mortality to negligible proportions. On the subject of difficult and inaccessible arteriovenous malformations, Mullan reveals some interesting detail of personal technique.

The role of antiplatelet and anticoagulant therapy in stroke prevention is explored convincingly and at length by Barnett. The problem posed by the asymptomatic carotid bruit is equally well dissected by Crowell *et al.* Lack of reliable information on natural history and paucity of major randomised studies however mean that the role of the various medical and surgical therapies remains unclear.

There are four chapters dealing with the cervical spine and the neurological complications of degenerative disease. Three are totally surgically oriented. Discussion ranges over many topics such as the relative merits of laminectomy and anterior disc excision, whether fusion is required after the latter operation, and whether prophylactic surgery is justified for cervical canal stenosis. The complications of surgery are given a well-deserved airing. The fundamental controversy—whether such operations have any long term value—is however avoided. It would have provided some balance had there been an account of the outcome for those patients who are not submitted to surgery. There is a brief contribution on the place of manipulative therapy for cervical disc disease.

The book is well written and well produced, the illustrations are of good quality,

and the references to each topic more than adequate. It can be recommended for selective perusal.

JJ MACCABE

Psychiatry Update: The American Psychiatric Association Annual Review, Volume II. Edited by Lester Grinspoon. (Pp 614; \$45.00.) Washington: American Psychiatric Press Inc, 1983.

These companion volumes to the annual meetings of the American Psychiatric Association are intended to "address the need of mental health professionals for comprehensive and current knowledge" in the field of psychiatry. Volume 2 is seen as related to the first, and presumably as the series grows with each meeting, overlap will be minimised and cross referencing to earlier volumes encouraged. Here, five major topics are covered, namely New Issues in Psychoanalysis, Geriatric and Family Psychiatry, Depressive Disorders and Bipolar Illness. Each one has several chapters on various aspects of the subject preceded by an introduction written by the "preceptor". Generally the chapters are concise, information packed, and well written, and provide an excellent update of some aspects of American psychiatry for the interested. The emphasis is, however, very much American. The frequent references to the DSM 3 indicate the almost excessive concern with the diagnostic system which at present pervades American psychiatrists, and much of the quoted work is from the USA. However, it is pleasing to note that non-tricyclic antidepressants are at least getting a foothold in their text books and probably soon in clinical practice, that serum antidepressant level monitoring is *not* routinely recommended (at \$50 a time—pharmacologists please note), and that research into some fundamental aspects of psychoanalysis is alive and well in some centres.

There is little in this volume to interest neurologists, although in spite of its bias, I would recommend it to psychiatrists who wish to avail themselves of good, up to date reviews on quite varied topics which will broaden their perspective on psychiatry, in the sense of getting a clear flavour of what our American colleagues are currently engaged in. There has been a remarkable change in orientation in recent years in that country, reflected not only in the content of the American Psychiatric Association annual meetings, but also in their scientific approach to the discipline reflected in this

volume. If the standard is maintained, this series will be a useful addition to the psychiatrists' library.

M TRIMBLE

Astrocytes: Normal, Reactive and Neoplastic. By Philip E Duffy. (Pp 236; \$46.00.) New York: Raven Press, 1983.

Only in relatively recent years has the astrocyte received the attention it merits. The concept of this cell type purely as a structural, supportive element in the nervous system is outdated. The principal aim of Philip Duffy's text is to elucidate the complex spectrum of functions of both normal and neoplastic astrocytes and to review the current state of knowledge on their biological characteristics. The author has chosen to deal not only with the normal astrocyte but, because their neoplastic counterparts give rise to the highest proportion of primary intrinsic brain tumours in Man, he has included an account of the pathology of and the diagnostic and therapeutic procedures applied to astrocytomas.

For convenience, the book has been divided into two parts, the first of which describes the genesis, morphology and metabolism of normal and reactive astrocytes and outlines their relationship with other cells; in particular neurons. The role of the astrocyte in the uptake and metabolism of GABA and other amino acids with putative neurotransmitter functions is elucidated and a section is included on astrocyte membrane receptors. Although, ostensibly, this part of the volume describes normal and reactive astrocytes much of our current knowledge has been gained from the study of tumour-derived or *in vitro* transformed astrocytic cell lines and therefore reference is made to this work.

A detailed chapter on astrocyte proteins, which is dedicated largely to glial fibrillary acidic protein, includes much of the author's own research on the expression of this astrocyte-specific marker in relation to the motility and physiological state of cultured cells. In the concluding chapter to the first part of the book, astrocytosis, in response to various pathological conditions of the central nervous system, is described and specialised astrocytic reactions are discussed.

The second part of the book deals with neoplastic astrocytes. Oncogenesis, chemical—and viral—induction of experimental tumours, malignant transformation